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ABSTRACT

Approximately 700 teenagers in Nassau County, New York become mothers every year. Most of these young mothers fail to finish high school, thereby embarking on marginal, nonproductive lives characterized by low earning power, long-term welfare dependency, more unplanned-for babies, and high-risk infants. In 1982 the Board of Cooperative Educational Services of Nassau County established the Teenage Pregnancy Program (TAP) to address the problems which put these young people at risk. TAP was a multidimensional program tailored to the needs of pregnant teenagers and oriented towards building positive futures. By providing intensive academic and psychological support, TAP aimed to help students develop self-confidence, better family relationships, parenting skills, and success in school. A program evaluation of 71 mothers previously served by TAP demonstrated the effectiveness of the program. Of the mothers served by TAP, 40% had graduated from high school, most had minimal substance abuse, and there was a low rate of giving birth to additional children. The results revealed a critical need for sustaining young mothers in the program over a longer time, i.e., beyond the school year in which they gave birth. (ABL)

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BOARD OF COOPERATIVE EDUCATIONAL SERVICES OF NASSAU COUNTY
Valentines Road and The Plain Road
Westbury, New York 11590

EVALUATION REPORT: TEENAGE PREGNANCY PROGRAM (TAP)

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I. DESCRIPTION OF THE TAP PROGRAM

A. Purpose

Approximately 700 teenagers in Nassau County become mothers every year. Most of these young mothers fail to finish high school (nationwide, 2 out of 3 pregnant girls drop out of school), thereby embarking on marginal, nonproductive lives characterized by low earning power, long-term welfare dependency, more unplanned-for babies, and high-risk infants.

In 1982, Nassau BOCES established the Teenage Pregnancy Program (TAP) to address the problems which put these young people at risk. TAP is a multidimensional program tailored to the needs of pregnant teenagers and oriented towards building positive futures. By providing intensive academic and psychological support, TAP aims to help students develop self-confidence, better family relationships, parenting skills, and success in school.

TAP is located at the Rosemary Kennedy Center in Wantagh. The program has its own wing in the building, complete with classrooms, a computer room, kitchen, nursery, and lounge areas. The atmosphere is warm, positive, and relaxed.

B. Educational Foundations

Because many of the girls were indifferent students and were frequently absent, remediation is provided as a matter of course. Classes are small. Students are grouped according to achievement, with levels from seventh to twelfth grades. Improved attendance is an important program goal. Teachers help students to develop better work and study habits, building new and more productive patterns.

As a result of the nuturing environment, support from peers and staff, small group instruction, and continuous personal attention, many TAP students achieve grade level for the first time. In many cases the new feelings of success generate a positive attitude toward education. A number of TAP graduates plan to enroll in college after high school or when feasible.

The curriculums of the students' home districts are considered in planning students' programs. This approach avoids problems for students who return to their home schools.

C. Practical Living Skills

In line with TAP's guiding principle of preparing students to lead independent lives, practical work and living skills are also taught.

A career exploration course guides the girls in exploring their personal values and potential career interests. Employment prerequisites such as interviewing techniques are taught. In addition, students address topics such as decision-making, budgeting and finding an apartment.

All students participate in an introductory word processing program which is designed to provide them with an edge in the job market.

TAP networks with community agencies. Guest speakers are invited to address the students and offer information concerning helpful community services.

D. Learning to Be A Parent

A fully-equipped and professionally supervised nursery is provided. Girls who continue in TAP after delivery can bring their babies to school and concentrate on their studies, free of the problems associated with daycare and separation. Mothers are encouraged to spend time with their infants at breaks during the school day. A mandatory period of supervised parenting is built into each student's daily schedule.

A comprehensive health program focuses on relevant areas including prenatal care, preparation for labor and delivery, human relations, and human sexuality. TAP insists on an environment altogether free of alcohol, drugs, and nicotine.

The young women are provided frequent opportunities to share problems and obtain peer support. A top program priority is emotional growth; toward this end, individual and group counselling are available.

Students are helped to establish better family relationships. Parents and other key relatives are welcome to visit the counsellors. Fathers of the babies are invited to attend counselling sessions, classes on parenting, and holiday celebrations.

Individual and group discussions focus on the parent-child relationship and the mothering role. Girls are taught about their babies' needs and learn how to fill those needs.

By the time her baby is born, each TAP student has had specific experience in caring for infants. In addition to classroom information on many aspects of infant care, each girl is required to work in the nursery for one full period a day. Under the direction of a registered nurse, students learn how to handle, feed, and play with babies. It is anticipated that the babies' presence right next to the classroom contributes to positive bonding.

E. Staffing

In 1989-90, three full-time administrators included an Executive Administrator and an Administrator located at the central office, and a Program Assistant at the program.

One full-time registered nurse provided childcare and supervision in the nursery. The part-time teaching and support personnel included the following positions:

- English, remedial reading teacher (.6)
- health education teacher (.5)
- science teacher (.4)
- math and word processing (.5)
- social studies and introduction to careers (.5)
- psychologist (.4)
- guidance counselor (8 hours weekly)
- home and career skills and art (.5)

II. THE QUESTIONNAIRE

A follow-up questionnaire was developed cooperatively by the Nassau BOCES Division of Instructional Programs and Services and the Nassau BOCES Office of Institutional Research and Evaluation.

Respondents rated various aspects of the TAP program (academics, career exploration, nutrition, etc.) on a 3-point scale assessing the extent of helpfulness. Respondents provided information about their age, marital status, living arrangements, and income. They stated whether or not they returned to TAP after childbirth and if they brought their babies to the nursery. They reported their education and/or training experiences after leaving TAP, and the problems that they faced. Respondents specified what they liked about TAP and how they would improve the program.

Questions about employment focused on amount of time employed, current employment status, position, and problems experienced.

Questions about the babies focused on residence, establishment of legal paternity, age, medical needs, babysitting and daycare arrangements, and problems experienced.

Former TAP students were asked whether they had contacted the TAP program, teachers, and/or fellow students since graduation, whether they were experiencing problems, and whether they were receiving help from community agencies.

Respondents rated the level of satisfaction with their lives and indicated what they believed was their greatest achievement to date.

Finally, students were asked to indicate their past and current experience with nicotine, alcohol, and other drugs, and whether TAP had influenced their experience in this area.

III. RESULTS

A total of 232 questionnaires were mailed to students who attended TAP beginning in 1983. Seventy-one questionnaires were returned, a response rate of 31%.

A. Demographics

Respondents ranged in age from 14-23 years. One-half of the girls was 18-19 years. The mean age was 18.3; the median age was 18.0 (Table 1).

Table 1

Current Age

Age	n	Percentage
23	4	6%
22	1	1
21	5	7
20	4	6
19	16	23
18	20	29
17	8	11
16	6	9
15	4	6
14	2	3
Total	70	101%

Mean Age = 18.3; median age = 18.0.

Four-fifths of the respondents had never been married. One-fifth was or had been married (Table 2).

Table 2

Marital Status

	n	Percentage
Never married	56	80%
Married	12	17
Separated or divorced	2	3
Total	70	100%

Four-fifths of the respondents currently lived in Nassau County. Of these, one-third lived in Hempstead or Long Beach (Table 3).

Table 3

Current Zip Code

	n	Percentage		n	Percentage
Hempstead	15	21	Elmont	1	2
Long Beach	7	10	Hicksville	1	2
Farmingdale	3	4	Island Park	1	2
Roosevelt	3	4	Massapequa Park	1	2
Uniondale	3	4	Merrick	1	2
Bellmore/No.Bellmore	2	3	Oceanside	1	2
Levittown	2	3	Valley Stream	1	2
Oyster Bay	2	3	Center Moriches	1	2
Seaford	2	3	Middle Island	1	2
Westbury	2	3	California	1	2
West Hempstead	2	3	Pennsylvania	1	2
Amityville	1	2	North Carolina	1	2
Bethpage	1	2	Ohio	1	2
Copiague	1	2	Not specified	11	7
			Total	70	100%

More than two-thirds of the respondents lived in their parents' homes. One-fourth either rented or owned a home or apartment (Table 4).

Table 4

Where Currently Living

	n	Percentage
Parent's home	48	69%
Rented house or apartment	10	14
Own house or apartment	7	10
Other relative's home	1	2
Shared housing	1	1
Other*	3	4
Total	70	100%

* Homeless and living with a friend (1), future mother-in-law (1), not specified (1).

Two-thirds of the respondents lived with their parents, three-fifths lived with their children. Nearly one-half had a brother or sister (the baby's uncle or aunt) living with them. Nearly one-fifth lived with a husband, and one-tenth lived with a grandparent. (Respondents indicated all the persons with whom they lived; their responses to this item were not mutually exclusive.) (Table 5.)

Table 5

Lives With

	n	Percentage*
Parent	46	65%
Children	43	61
Brother/sister	32	45
Husband	12	17
Grandparent	6	9
Friend	1	1
Live alone	0	0
Other**	7	10

* Respondents checked all that applied.

** Boyfriend (2), fiance's mother(1), friend (1), not specified (3).

More than one-half of the respondents earned a salary. One-fourth received income from their families (Table 6).

Table 6

Source of Income

	n	Percentage*
Salary/wages	41	58%
Family	17	24
Private insurance	4	6
Social Security (SSI)	4	6
Public assistance (DSS)	4	6
Unemployment assistance	2	3
Veteran benefits	0	0
Other**	5	10

* Respondents checked all that applied.

** Not specified.

Respondents indicated their annual income. If married, this figure included their husband's income. One-fifth reported a yearly income below $5,000. One-seventh reported an income between $5,001-$14,499. Nearly one-fifth reported an income between $15,000 and $25,000. Two-thirds of the respondents did not respond to this item (Table 7).

Table 7

Yearly Income*

	n	Percentage
Below 5,000	14	20%
5,001 - 15,000	10	14
15,001 - 25,000	13	18
25,001 - 35,000	6	9
35,001 - 45,000	1	1
missing data	27	38

* Including husband, if married.

Only one-tenth of the respondents lived in subsidized housing (Table 8).

Table 8

Live in Subsidized Housing

	n	Percentage
No	54	91%
Yes	17	9

None of the respondents received Medicaid (Table 9).

Table 9

Receive Medicaid

	n	Percentage
No	71	100%
Yes	0	0

B. Education

Three-fifths of those responding to the survey had earned a high school diploma. One-tenth was currently earning a diploma. Approximately one-fourth had dropped out of school (Table 10).

Table 10

Earned High School Diploma

	n	Percentage
Yes	41	61
Currently earning high school diploma	18	27
No	8	20
Total	67	100%

Twenty-three respondents explained why they had not yet earned a high school diploma. Eighteen respondents indicated that they were still in school, 1 had earned a GED, 3 were caring for their babies exclusively, and 1 had moved (Table 11).

Table 11

Why Did Not Earn High School Diploma

	n	Percentage
Still in school	18	79%
Got GED after leaving TAP	1	4
Need a babysitter	1	4
I had a baby	1	4
Changed residence/could not attend school	1	4
Want to have baby cared for by family only	1	4
Total	23	99%

Slightly more than one-half of the respondents had enrolled in job training or school after leaving TAP. One-tenth pursued job training, two-fifths returned to high school, and one-twentieth went to college (Table 12).

Table 12

Attended School or Job Training After TAP

	n	Percentage
No	29	45%
Yes	35	55
job training*	6	10
returned to high school	25	39
college**	4	6
Total	64	100%

* Medical assistant (1), data entry (1), sales (2), word processing (1), bank teller (1).

** Earned college degree (1).

Currently, one-fourth of the respondents was enrolled in school or training. One-sixth went to high school, and one-tenth went to college (Table 13).

Table 13

Currently Enrolled in School or Training

	n	Percentage
No	50	75%
Yes	17	25
High School	11	16
College	6	9
Total	67	100%

C. Employment

One-third of the respondents was unemployed and actively seeking employment. Slightly more than one-third was employed. Twice as many were employed full-time as part-time. One-tenth was unemployed and not seeking employment (Table 14).

Table 14

Current Employment Status

	n	Percentage
Unemployed, looking	22	32%
Employed full-time	17	25
Employed part-time	8	12
Unemployed, not looking	8	11
Employed part-time, looking for full-time	4	6
Full-time homemaker	3	4
Other*	7	10
Total	69	100%

* Babysitter (1), Self-employed sales (1).

One-third of the respondents were employed in 1989. Nearly one-half had worked most recently in 1988. One-fifth had not worked since 1987 (Table 15).

Table 15

Year Last Employed

	n	Percentage
1989	11	31%
1988	16	46
1987	7	20
1986	1	3
Total	35	100%

Of those employed in 1988-89, one-third had worked 5 months (the maximum possible because the survey was conducted in May), and one-half had worked 1-2 months (Table 16).

Table 16

Number of Months Employed in 88-89

months	n	Percentage
5	23	34%
4	4	6
3	7	10
2	12	18
1	21	31
0	1	1
Total	68	100%

Nearly two-fifths of the respondents worked in sales occupations. One-third worked in service occupations. One-fifth had office jobs. Nearly one-tenth worked in production. Two respondents worked as coordinator or manager (Table 17).

Table 17

Kind of Work

	n	Percentage
Sales	21	37%
Service	18	32
Office	12	21
Production	4	7
Coordinator/Manager	2	3
Total	57	100%

One-fourth of the respondents reported no problems obtaining or maintaining employment. One-fourth reported that childcare was a problem (Table 18).

Table 18

Problems re: Obtaining or Maintaining Employment

	n	Percentage
None	13	25%
Childcare	12	24
Not enough money or hours	3	6
Need training	3	6
Transportation	3	6
Bosses	3	6
Fit my schedule	2	4
Finding a job	2	4
Don't like working	2	4
Want to be home with child	2	4
Finding classes for SAT preparation	1	2
Understanding their language	1	2
Long hours	1	2
Jobs I like pay too little	1	2
My age	1	2
Fiance	1	2
Total	51	101%

D. The Child

Two-thirds of the respondents had established their children's legal paternity (Table 19).

Table 19

Established Legal Paternity

	n	Percentage
Yes	39	68%
No	18	32
Total	57	100%

One-fourth of the young women had married their child's father (Table 20).

Table 20

Married Father

	n	Percentage
No	54	76%
Yes	17	24
Total	71	100%

Nearly all the respondents lived with their children (Table 21).

Table 21

Lives With Child

	n	Percentage
Yes	64	96%
No*	3	4
Total	67	100%

* Adoptive parents (2), not specified (1).

One-eighth or 8 of the respondents gave birth to other children; six were married at the time of the second birth, only 2 were single (Table 22).

Table 22

Had Other Children

	n	Percentage
No	58	88%
Yes	8	12
While married	6	9
While single	2	3
Total	66	100%

Currently, 9 young women were pregnant with their first child, 55 had given birth to one child, 7 had two children, and 1 had three children (Table 23).

Table 23

Number of Children

	n	Percentage
Not yet born	9	10%
1	55	78
2	7	9
3	1	3
Total	71	100%

The average age of the oldest child was 2.1 years. The average age of the second child was 2.3 years (Table 24).

Table 24

Age of Children

	n	Percentage
Oldest Child		
6	2	3%
5	2	3
4	3	4
3	8	12
2	17	26
1	25	38
pregnant	9	14
Second Child		
5	1	6
4	1	6
2	2	11
1	3	16
pregnant	11	61
Third Child		
1	1	100%

Mean age oldest child = 2.1, Median age = 2.0.
Mean age second child = 2.3, Median age = 2.0.

Nine-tenths of the mothers took their children for regular medical checkups (Table 25).

Table 25

Child Has Regular Medical Checkups

	n	Percentage
Yes	54	92%
No	5	8
Total	59	100%

Fewer than one-tenth of children had special medical needs. Three of the health problems were minor (low blood, anemia, asthma), a fourth was controlled (seizures), and a fifth resulted from an automobile accident (Table 26).

Table 26

Child Has Special Medical Needs

	n	Percentage
No	51	91%
Yes*	5	9
Total	56	100%

* Low blood (1), seizures (1), anemia (1), asthma (1), brace (1).

Asked to indicate who cared for their children when the mother was not home, two-thirds of the respondents indicated that the children were cared for by their grandparents; two-fifths each indicated that friends or the child's father cared for the child. One-tenth of the mothers used certified daycare. One-tenth hired babysitters (Table 27).

Table 27

Who Watches Children When Mother is Not There?

	n	Percentage*
Grandparent	47	66%
Brothers/Sisters	30	42
Friend	16	23
Husband/father	15	21%
Certified Daycare	8	11
Sitter	8	11
Neighbor	4	6
Child stays alone	0	0
Uncertified Daycare	0	0
Other*	2	1

* Respondents checked all that applied.

** Cousin (1), whoever is there (1).

One-fourth of the mothers had tried to get certified daycare. Of these, three-fifths had not succeeded (Table 28).

Table 28

Use of Certified Daycare

	n	Percentage
Tried to get	17	24%
Succeeded in getting	11	41
Did not succeed	16	59

Twelve mothers reported that they were currently experiencing problems concerning their children. Eight of these mothers indicated problems related to child management or discipline (Table 29).

Table 29

Current Problems Concerning Their Children

Won't listen	2
Going to sleep	2
Touches everything	1
Terrible twos	1
Discipline	1
Waking at night	1
Don't have medical for baby	1
Wants another baby	1
Need time together	1
Allergies	1
Total	12

E. TAP Program

One-fourth of the respondents attended TAP in 1988-89. One-fifth had attended TAP in 1987-88, and one-tenth each attended in 1986-87 and 1985-1986. One-fourth did not specify the years attended (Table 30).

Table 30

Years Attended TAP

	n	Percentage
88-89	19	27
87-88	13	18
86-87	7	10
85-86	6	9
84-85	3	4
83-84	3	4
Not specified	20	28
Total	71	100%

Nearly one-half of the respondents had attended the program between 7-10 months. One-half attended 1-6 months (Table 31).

Table 31

How Long Attended TAP

Number of months	n	Percentage
13	1	1
10	13	19
9	4	6
8	7	11
7	7	11
6	6	9
5	5	8
4	11	16
3	3	5
2	4	6
1	5	8
	66	100%

TAP components which were rated "extremely helpful" or "helpful" by at least 90% of the respondents were:

- nursery
- parenting skills
- psychological counseling
- getting a high school diploma
- assistance with health care
- nutrition and meal skills

(Table 32)

Table 32

Helpfulness of TAP

	(n)	Extremely Helpful	Helpful	Not Helpful	Mean
Nursery	(70)	79	20	1	2.8
Parenting skills	(70)	79	20	1	2.7
Psychological counseling	(70)	79	19	3	2.7
Getting a high school diploma	(68)	68	25	7	2.6
Assistance with health care	(69)	65	29	6	2.6
Nutrition/meal care skills	(69)	52	42	6	2.5
Academics	(68)	47	50	3	2.4
Word processing/computer application	(66)	42	46	12	2.3
Making friends	(68)	40	50	10	2.3
Speakers from community agencies	(66)	41	50	9	2.3
Typing	(68)	27	57	16	2.1
Career exploration	(68)	24	54	22	2.0
Workshops for teen fathers	(59)	15	34	51	1.6
Grandparent workshops	(59)	10	41	49	1.6

* Rated on a scale from 1= "Not helpful" to 3= "Extremely helpful."

Asked to indicate what they liked best about TAP, most respondents referred to the nursery. Also mentioned by at least ten respondents were:

- learning how to care for the child
- teachers
- classes
- friendly, relaxed atmosphere
- help and support

(Table 33).

Table 33

Liked Best About TAP

	n	Percentage*
The nursery	26	37%
Learn to care for child	10	14
Teachers	10	14
The classes	9	13
Friendly/relaxed/comfortable	8	11
Help and support	7	10
People who care	4	6
Group discussions/counseling	3	4
Door to door transportation	3	4
Girls in same situation/ closeness	2	3
Only had to take the classes needed to graduate	2	3
Attention	2	3
It is perfect/everything	2	3
Small classes	1	1
Can eat all the time/the kitchen	1	1
Guest speakers	1	1
Nurses	1	1
Computer class	1	1
Health/children classes	1	1
Total	93	131%

* Respondents offered more than 1 response.

Three-fifths of the young women had returned to TAP after giving birth (Table 34).

Table 34

Returned to TAP After Giving Birth

	n	Percentage
Yes	41	60%
No	27	40
Total	68	100%

Asked to explain why they had returned to TAP after childbirth, one-third responded that they had returned because they wanted to graduate high school and one-fourth had returned for the daycare. The most common reasons for not returning (one-tenth each) included the district not providing transportation for the baby and still being pregnant at graduation (Table 35).

Table 35

Why or Why Not Returned to TAP After Giving Birth

	n	Percentage
Yes		
Want to graduate HS	20	31%
For daycare	15	23
Enjoyed environment/ friendships	5	7
To learn about childcare	1	1
Fewer hours in school	1	1
To show the baby	1	1
No		
District did not provide transportation for baby	7	11
Still pregnant when graduated	5	8
Moved	3	5
Gave birth shortly before graduation	3	5
Had a home tutor	2	3
TAP was no help	1	1
Did not keep baby	1	1
Graduated with my school	1	1
Total	66	99%

Slightly more than one-half of the respondents had returned to TAP with their babies (Table 36).

Table 36

Returned to TAP with Baby

	n	Percentage
Yes	36	54%
No	31	46
Total	67	100%

Of the 37 respondents who offered an explanation why they returned to TAP with their babies, three-fifths indicated that they brought their babies in order to receive childcare in the nursery, and one-fourth indicated that they brought their babies to TAP so they could spend more time with them.

Of the two-fifths of the respondents who returned to TAP without their babies, approximately one-third was not permitted to bring their babies, and about one-seventh each was still pregnant, returned to their local high school, or did not keep the baby (Table 37).

Table 37

Why or Why Not Returned With Baby

	n	Percentage
Yes		
So baby could be cared for/ nursery	22	60%
To be with baby as much as possible	10	27
For continuity	2	5
To show baby/to share experiences	2	5
Was told I had to bring baby	1	3
Subtotal	37	100%
No		
Babies not allowed on bus	8	30
Still pregnant	4	15
Going back to HS	3	12
Did not keep baby	3	12
Graduated HS	2	8
Moved	2	8
Home tutor	1	4
Didn't want to travel with baby	1	4
I didn't return, due to sickness	1	4
I didn't return, worked	1	4
Subtotal	26	101%

Various suggestions for improving the program were offered by the TAP students and graduates. These included:

- Go off grounds for lunch
- Larger nursery
- Expand academic curriculum/larger selection of courses
- Job training
- More teachers
- Get fathers more involved

(Table 38)

Table 38

Suggestions to Improve the TAP Program

	n	Percentage
Go off grounds for lunch	5	8
Larger nursery	5	8
More space	4	6
Expand academic curriculum/larger selection of courses	4	6
Job training	3	5
Change nothing	3	5
More teachers	3	5
Get fathers more involved	3	5
Change staff	2	3
Visits with teenage girls in districts	2	3
Publicize program	2	3
Field trips	2	3
Provide transportation for all girls and babies	1	1.5
More discipline	1	1.5
Support groups for fathers	1	1.5
Support groups after graduation	1	1.5
Support groups for grandparents	1	1.5
Lunch facilities	1	1.5
More nurses	1	1.5
Used college study methods	1	1.5
Teach computer operations	1	1.5
Involve family more	1	1.5
More help and advice	1	1.5
Stricter attendance requirements	1	1.5
Nursery for toddlers	1	1.5
Busses should take girls directly home	1	1.5
Workshops	1	1.5
Exercise class	1	1.5
Limit number of students in program	1	1.5
Separate classes for different grade levels	1	1.5
Watch soap operas	1	1.5
Racially segregated counseling groups	1	1.5
Hire more nurses	1	1.5
Busses should take girls to doctors and back	1	1.5
Less involvement in students' personal business	1	1.5
Round-trip transportation for all districts	1	1.5
Less racial tension	1	1.5
More privileges	1	1.5
More individual attention	1	1.5
Total	65	100.5%

One-fourth of the respondents indicated that they had not experienced major problems after leaving TAP. One-fifth reported difficulty finding daycare or a babysitter. Other problems experienced after leaving were:

- Unable to attend school
- Making ends meet/finances
- Parenting, taking care of child
- Being on my own
- Explaining to friends
- Not enough time with baby
- Finding a good job

(Table 39)

Table 39

Major Problems After Leaving TAP

	n	Percentage
No problems	16	27
Daycare/finding a babysitter	10	17
Unable to attend school	6	11
Making ends meet/finances	6	9
Being on my own	4	7
Parenting/taking care of child	4	7
Explaining to friends	3	5
Not enough time with baby	2	4
Finding a good job	2	4
Adjusting to marriage	1	1
Adapting to college	1	1
Peer pressure	1	1
Lack of understanding	1	1
Stress	1	1
Problems with baby's father	1	1
Giving up baby	1	1
My mother-in-law	1	1
Total	61	100%

One-tenth of the girls reported that they had needed help and returned to TAP for help (Table 40).

Table 40

Needed Help and Returned to TAP

	n	Percentage
No*	56	89%
Yes**	7	11

* Will return next year (2), can't help me (1), gave baby for adoption (1), good support at home (1).

** Enjoy visiting/calling (2), want to learn more (1), no one helped (1).

One-third reported that they had contacted a TAP teacher after leaving TAP (Table 41).

Table 41

Contacted a Teacher After Leaving TAP

	n	Percentage
Yes*	17	29%
No**	42	71

* Like to stay in touch (8), Not interested (2), Need telephone (1), Moved (1), Too busy (1), Donated equipment for babies (1), For information on where to get support (1), Offered to help (1).

** Will return next year (1), To say it was great (1), At Old Westbury (1), Attended my graduation (1), Visited my friend who attended (1).

One-third of the respondents had remained friends with other TAP students (Table 42).

Table 42

Remained Friends With Other TAP Students

	n	Percentage
Yes	20	33%
No	46	67

Nearly nine-tenths of the respondents did not smoke cigarettes while they attended TAP. Nearly four-fifths did not smoke currently. Approximately one-tenth of the respondents reported that TAP had an impact in this area.

Nearly all the respondents did not use alcohol when they attended the TAP program. Nearly nine-tenths did not use alcohol currently. Fewer than one-tenth of the respondents reported that TAP had an impact in this area.

Nearly three-fourths of the respondents did not use drugs when they attended the TAP program. (Nearly one-tenth did not respond to this item.) Nearly one-fifth of the respondents reported that TAP had an impact in this area (Table 43).

Table 43

Substance Abuse

	Did not use at TAP		Do not use now		Used while at TAP		Use now		TAP had impact	
	(n)	%	(n)	%	(n)	%	(n)	%	(n)	%
Alcohol	(66)	98%	(62)	91%	(1)	2%	(6)	9%	(3)	5%
Cigarettes	(60)	87	(55)	82	(9)	13	(12)	18	(7)	11
Drugs	(51)	72	NA		(14)	20	NA		(13)	18*

* I became more educated about effects (12),
I learned to face my problem (1).

F. Current Problems, Achievement, Satisfaction

Asked to indicate problems, in general, which they were currently experiencing, one-half of the respondents identified a total of 50 problems. Financial problems, experienced by eleven or one-seventh of the respondents, were most common. Other problems which were experienced by at least 7 respondents were: daycare/babysitter, housing/living arrangements, and problems with the boyfriend/child's father (Table 44).

Table 44

Problems Currently Facing

	n	Percentage
Financial	11	15
Daycare/babysitter	5	7
Housing/living arrangements	5	7
My boyfriend/child's father	5	7
Everything	2	3
School	2	3
Medical payments	2	3
People at school	1	1
Mother-in-law	1	1
Find a job	1	1
Getting daughter back/forth to school during work	1	1
Total	50	49%

Slightly more than one-tenth of the women currently received help or support from a public agency. Ninety percent did not receive help or support from a public agency (Table 45).

Table 45

Currently Receiving Help or Support

	n	Percentage
No	62	87%
Yes*	9	13

* Public assistance (1), Long Beach Reach (1), WIC (3), Social Services (1), Teen Projects at DSS (1)

Approximately one-fifth of the women, respectively, considered their greatest achievement to be their baby or graduating high school. One-tenth considered their greatest achievement was going to college. Nearly one-tenth considered their greatest achievement was their ability to be self-supporting (Table 46).

Table 46

Greatest Achievement

	n	Percentage*
My baby	22	31
Graduated hs	21	30
Going to college	10	14
Self-supporting	8	11
Successful at job	4	6
Married baby's father	4	6
Job training	2	3
Music/dance career	2	3
Made many good friends	1	1
Stayed with baby's father	1	1
My car	1	1
No drugs	1	1
Overcoming obstacles	1	1
Total	78	109%

* Respondents offered more than 1 response.

Asked to rate their satisfaction with life on a scale from 1-10, nearly two-fifths rated their satisfaction either 9 or 10. The median happiness rating was 8 (Table 47).

Table 47

Satisfaction with Life

	n	Percentage
10	14	21%
9	10	15
8	13	1
7	5	9
6	5	7
5	12	7
4	1	18
3	1	2
1	4	6
0	2	3
Total	67	100%

* Mean score 7.0, median score 8.0.

Nearly nine-tenths of the girls identified themselves on their surveys, thereby encouraging future contact with the program (Table 48).

Table 48

Offered Name

	n	Percentage
Yes	60	85%
No	11	15
Total	71	100%

IV. DISTRICT DATA

Data collection forms were sent to 27 of the 56 Nassau County school districts which sent students to the TAP program since its beginning in 1982. Twenty-six school districts provided information as requested.

Table 49 presents the 26 districts that provided follow-up data on 217 TAP students. Districts sending the most students included Hempstead (33%), Uniondale (20%), Long Beach (10%), and Westbury (8%). Seven-tenths of the students who attended TAP came from one of these four districts.

Table 49 presents, also, the numbers of TAP students who graduated, were currently enrolled, and dropped-out are presented by district. Two-fifths of the students graduated and one-fifth were currently enrolled. Two-fifths of the TAP students had dropped out of school. This outcome is highly commendable in view of the nationwide 66% dropout rate for pregnant teenagers.

Table 49

Districts Represented in TAP By Graduation

	Total Attended		Graduated	Currently Enrolled	Dropped Out
	n	%	n	n	n
Baldwin UFSD	(2)	1%	1	-	1
Bellmore-Merrick CHSD	(5)	2	4	1	-
Carle Place UFSD	(1)	0.5	-	-	1
East Meadow UFSD	(9)	4	3	-	6
Farmingdale UFSD	(10)	4	5	3	2
Glen Cove City SD	(2)	1	2	-	-
Hempstead UFSD	(69)	33	20	23	26
Hewlett-Woodmere UFSD	(1)	0.5	1	-	-
Hicksville UFSD	(3)	1	1	-	2
Levittown UFSD	(3)	1	-	2	1
Long Beach City SD	(22)	10	8	-	14
Malverne UFSD	(4)	2	2	-	2
Mineola UFSD	(1)	0.5	-	-	1
Oyster Bay-E. Norwich CSD	(2)	1	-	1	1
Plainedge UFSD	(2)	1	-	1	1
Rockville Centre UFSD	(3)	1	-	2	1
Roslyn UFSD	(1)	0.5	1	-	-
Seaford UFSD	(4)	2	2	-	2
Sewanhaka CHSD	(3)	1	1	-	2
Uniondale UFSD	(42)	20	20	6	16
Valley Stream CHSD	(4)	2	3	1	-
Wantagh UFSD	(1)	0	1	-	-
Westbury UFSD	(18)	8	7	-	11
West Hempstead UFSD	(5)	2	4	-	1
Total	(217)		86	40	91
		99%	40%	18%	42%

Districts provided years of TAP attendance for 206 students. Nearly three-fourths of the students had attended the program during or after the 1986-87 school year (Table 50).

Table 50

Year Students Started Attending TAP

School Year	n	Percentage
1988-89	60	29%
1987-88	46	22
1986-87	46	22
1985-86	19	9
1984-85	20	10
1983-84	15	7
Total	206	99%

Nearly one-third of the girls who attended TAP were 12th graders. Slightly more than one-fourth were in 11th grade, and slightly more than one-fifth were in 10th grade. Nearly one-fourth were in 8th or 9th grade during the time they attended TAP (Table 51).

Table 51

Grade In School When Attended TAP

	n	Percentage
12	65	30%
11	61	28
10	48	22
9	34	15
8	12	5
Total	220	100%

1988-89 was an extremely successful year for the TAP program. Of the 57 students who enrolled in the program, one-third graduated and one-half remained enrolled. There appear to be considerably fewer drop-outs in 1988-89 than in each of the previous years of TAP.

It may be the case that girls who attended TAP in 1988-89 will be less likely to drop out of high school than girls who attended TAP in previous years. Or, another possibility is that some of the girls who attended in 1988-89 will drop out of high school in subsequent years when they are required to return to their local school districts (and make their own arrangements for childcare).

Table 52

Year Started TAP by Graduation

		Graduated		Currently enrolled		Dropped out	
Year in TAP	Total n	(n)	Percentage	(n)	Percentage	(n)	Percentage
1988	(57)	(18)	30	(30)	54%	(9)	16%
1987	(46)	(17)	37	(6)	13	(23)	50
1986	(44)	(17)	39	(2)	4	(25)	57
1985	(19)	(8)	42	-	-	(11)	58
1984	(20)	(9)	45	(1)	5	(10)	50
1983	(32)	(18)	56	(1)	3	(13)	41
Total	218	(87)	40%	(40)	19%	(91)	41%

Regardless of the year attended, students who attended TAP in Grade 12 were least likely to drop out of school, and students who attended in 11th grade were less likely to drop out of school than students in the lower grades (Table 53).

Table 53

Grade in School While in TAP by Graduation

		Graduated		Currently enrolled		Dropped out	
Grade	Total n	(n)	Percentage	(n)	Percentage	(n)	Percentage
12	(61)	(50)	82%	(0)	0%	(11)	18%
11	(60)	(23)	38	(13)	22	(24)	40
10	(47)	(12)	26	(8)	17	(27)	57
9	(33)	(1)	3	(13)	39	(19)	58
8	(12)	(0)	0	(5)	42	(7)	58
Total	213	86	40%	39	19%	88	41%

V. CONCLUSIONS

This study reported the results of a questionnaire completed by 71 of 232 students who attended TAP, the Teenage Pregnancy Program administered since 1982 by the Board of Cooperative Educational Services of Nassau County. One-half of the respondents attended the program 7-10 months; one-half attended 1-6 months.

If effectiveness of TAP is defined as based upon a combination of criteria including: students' perception of helpfulness of the program, low rate of recidivism, minimal substance abuse, graduation from high school, ability to be independent, and graduates' competence as parents, then the TAP program has been demonstrated to be effective.

Helpfulness of the program: Virtually all the respondents expressed that the most helpful components of TAP were the nursery, parenting skills, psychological counseling, getting a high school diploma, assistance with health care, and nutrition and meal planning. Students particularly valued the nursery, the opportunity to learn to care for their baby, and the relaxed, caring environment.

Low rate of recidivism: Eight respondents gave birth to additional children. Of these eight, six young women were married at the time of the second birth; only two were unmarried.

Minimal substance abuse: Most TAP students and graduates did not smoke cigarettes or drink alcohol. A majority did not use drugs. Respondents indicated that TAP had a greater impact on their knowledge and attitudes about drugs than on their knowledge and attitudes about cigarettes and alcohol.

The median rating of respondents' satisfaction with life was 8 (on a scale from 1-10). It would be unlikely that respondents' positive rating of satisfaction with life is associated with substance abuse.

Graduation from high school: Two-fifths of TAP students graduated high school. One-fifth were currently enrolled. Two-fifths of TAP students had dropped out of high school. This figure compares very favorably with the 66% dropout rate for pregnant teens nationwide.

Students who attended TAP in Grade 12 were least likely to drop out of school. Students who attended TAP in 11th grade were less likely to drop out of school than students in the lower grades.

It is likely that 8th, 9th, and 10th grade mothers who dropped out of school were unable to arrange childcare for their babies. A majority of respondents who returned to TAP with their babies explained that they brought their babies because of the nursery. (New mothers are unable to arrange certified daycare for newborns because of mandates that infants in daycare must be inoculated and at least 8 weeks old.)

Ability to be independent: Nearly three-fourths of respondents lived with their parents. This large proportion was expected in view of the fact that the respondents' median age was 18, only one-fifth of the girls was 20 years or older, and only one-fifth of the girls had married.

Financial problems were the most frequent problem experienced by respondents. However, virtually none of the respondents lived in subsidized housing. None received Medicaid. Most of the young women reported that they did not receive help or support from a public agency.

Approximately one-third of the respondents was employed, the majority of them full-time. One-third of the respondents was unemployed and actively seeking employment. One-fourth of respondents reported that childcare was a problem that interfered with employment.

The need for childcare appeared to interfere with respondents' ability to be independent. Obtaining childcare was the second most common problem currently experienced by respondents, and the major problem they experienced after leaving TAP.

Competence as parents: TAP emphasized the need for prenatal medical care. The infants born to this population of adolescent mothers were born healthy and of normal weight. Fewer than one-tenth of the babies had special medical needs. Where there were health problems, these were minor or controlled and not the result of low birth weight.

The majority of respondents lived with their babies. Virtually all the mothers took their children for regular medical checkups, again, a responsibility emphasized at TAP.

Although just one-fourth of the young women had married their child's father, two-thirds of the respondents had established their child's legal paternity. Establishing legal paternity was strongly encouraged at TAP.

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This program evaluation demonstrated the effectiveness of the TAP program. Moreover, it revealed a critical need for sustaining young mothers in the program over a longer time.

Past practice limited enrollment in TAP to the school year in which girls were pregnant or gave birth. Girls who continued high school returned to their local school districts.

Past practice assumed that (1) TAP students were emotionally ready to return to the mainstream, and (2) that the girls had resources for childcare. The dropout statistics for mothers in grades 8-11 and the types of problems the girls experienced after leaving TAP provide evidence that these assumptions were <u>not</u> supported.

By leaving TAP and returning to their local districts in the new school year beginning after their babies are born, the young mothers were deprived of even more than the valuable opportunity to complete their high school education. They were deprived of an environment in which they can bond with their children and learn parenting skills while preparing to lead independent lives.

Currently, space limitations require that Nassau BOCES maintains the past practice of limiting enrollment in TAP to the school year in which girls are pregnant or give birth. However, in consideration of the documentation obtained through this study, the researchers posit that young mothers and their young children would be better served if they were allowed to continue in TAP until such time that it could be determined that they had sufficient emotional and practical resources to thrive independently.

This study was hampered by two limitations. The first limitation created, in part, by the difficulty of locating TAP participants over the past seven years, was the relatively low response rate. Although extensive effort was expended in attempting to locate the TAP students (through a series of mailings and contact with local school districts), nevertheless a number of surveys were returned as undeliverable and a number of surveys were never returned at all.

A second limitation is methodological in that this was ex post facto research and therefore constrained by the complications associated with such research. The sample was self-selected; there was no control or comparison group; there was no manipulation of variables, there was no control of extraneous variables.

Because of its limitations, this study can not definitively prove that TAP was the cause which produced a positive adjustment on the part of its students. Notwithstanding its limitations, this study has produced important information about our students. This information can be used to advantage in evaluating the TAP program and planning its further development.